STEVE HAWES COMPANY, INC.

Mechanical Contractor 155 RIVER ROAD, UNIT 7 BOW, NEW HAMPSHIRE 03304-3310

(603)228-4570 FAX (603)226-0169 <u>mhawes@shawesco.com</u>

dhawes@shawesco.com dszekely@shawesco.com

To: Barrington Safety Complex

Attn: Jim Towle

Date: December 15, 2020

Re: Barrington Safety Complex

MECHANICAL PROPOSAL

This proposal is based on a site visit with Facilities Manager, Jim Towle. The following is included:

- 1. Permits, fees and inspections related to this contractor's scope of work.
- Provide and install two (2) 18,000 BTU Fujitsu outside heat pumps with two (2) 7,000 BTU wall heads and two (2) 12,000 BTU wall units. All refrigerant and condensate piping provided and installed. NOTE: Electrical and Wall Blocking By Others.)
- 3. Provide and install one (1) Mirca 150 wall mounted HRV for workout area. **NOTE: All Electrical By Others.)** \$1885.00
- 4. Provide and install one (1) attic exhaust fan with reverse acting thermostat and barometric damper. (All Electrical By Others.) \$3850.00
- 5. Install duct insulation of return trunk in attic. \$1200.00

Related Work By Others:

- Electrical
- Concrete cutting, coring and patching
- Excavation, backfilling and compaction
- Structural modifications
- Flashing of exterior modifications
- Onsite dumpster
- Ductwork pressure testing

WE PROPOSE to furnish and install all labor and material – complete in accordance with the above specifications and subject to conditions in this agreement for the sum of: **As Noted Above**

specifications and subject to conditions in this agreement for the sum of: As Noted Above Payment is to be made as follows: Net 30 days after requisition date Balance outstanding thirty days after invoice date will be subject to service charges of 2% per month. Any and all fees associated with collections are to be the responsibility of the owner or the owner's representatives. ACCEPTED. The noted specifications and conditions Respectfully, are satisfactory and are hereby accepted. You are authorized Steve Hawes Co., Inc. to do the work as specified. Payments will be made as outlined. This PROPOSAL will be withdrawn by SHCI if not accepted BY:__ **Darryl Szekely** within 15 days. The SUM indicated is valid for 15 days. Date of Acceptance: dszekely@shawesco.com BY: